



**LANDLORD AUTHORIZATION FORM
REQUIRED FOR SERVICE**

Date: _____

Town of Vienna
Water and Sewer Department
127 Center Street South
Vienna, VA 22180

Tenant Names: _____ _____ _____ _____	Service Address: Owner Name, Mailing Address, Phone, Email:
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Dear Town of Vienna Water and Sewer Customer Service,

The tenant or tenants above have entered into a lease for the property located at the service address above, and are authorized to obtain water and sewer services at this address.

_____ By checking this space I certify that my tenant or tenants receive need-based local, state or federal rental assistance and are not required to pay the security deposit. (Documentation must be attached.)

I understand that according to Vienna Town Code section 18.4 no more than four unrelated persons can occupy a residential rental property. I further understand that according to the Code of Virginia, section 15.2-2119 unpaid water and sewer bills of a tenant will result in water service being terminated, and can ultimately result in a lien on the property I own at the service address above.

Signed:

(Property Owner)

(Date)

Note: Advanced written landlord authorization is now required under the Code of Virginia, section 15.2-2119. No water & sewer service will be turned on without written authorization.

Town of Vienna Use Only

Verified ownership records with Fairfax County Real Estate: _____

Date: _____